

10-16-06

IFW \$



Application No. (if known): 10/735,181

Attorney Docket No.: 00597/0200639-US0

## Certificate of Express Mailing Under 37 CFR 1.10

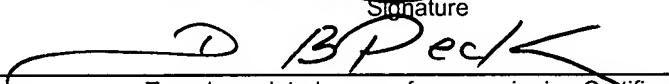
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on October 13, 2006  
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Signature

  
Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)

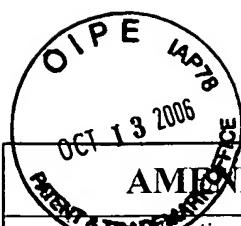
Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

Amendment Transmittal (1 page)

Amendment in Response to Non-Final Office Action (7 pages)

Check in the amount of \$600.00

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**AMENDMENT TRANSMITTAL LETTER**Docket No.  
00597/0200639-US0Application No.  
10/735,181-Conf. #2581Filing Date  
December 12, 2003Examiner  
L. K. BuiArt Unit  
3728

Applicant(s): Yasutoshi Nishimura et al.

Invention: MEDICINE WRAPPING MACHINE, MEDICINE WRAPPING SHEET, AND DIVIDED WRAPPING BAG

**TO THE COMMISSIONER FOR PATENTS**

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	32	- 29 =	3	x 50.00	150.00
Independent Claims	3	- 3 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within second month					450.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					600.00

 Large Entity Small Entity No additional fee is required for this amendment. Please charge Deposit Account No. 04-0100 in the amount of \$ . A duplicate copy of this sheet is enclosed. A check in the amount of \$ 600.00 to cover the filing fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge and credit Deposit Account No. 04-0100 as described below. A duplicate copy of this sheet is enclosed. Credit any overpayment. Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

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Dated: October 13, 2006

Melvin C. Garner

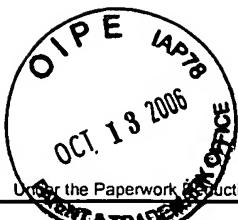
Attorney/Agent Reg. No.: 26,272

DARBY &amp; DARBY P.C.

P.O. Box 5257

New York, New York 10150-5257

(212) 527-7717



PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b>		Application Number	10/735,181-Conf. #2581
<b>For FY 2005</b>		Filing Date	December 12, 2003
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Yasutoshi Nishimura
		Examiner Name	L. K. Bui
		Art Unit	3728
<b>TOTAL AMOUNT OF PAYMENT</b> (\$)		600.00	
		Attorney Docket No.	00597/0200639-US0

**METHOD OF PAYMENT** (check all that apply)

<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account	Deposit Account Number: 04-0100		Deposit Account Name:	Darby & Darby P.C.
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments			

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**Fee Description

Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
32 - 29 = 3	x 50.00	= 150.00		<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	
3 - 3 = 0	x 200.00	= 0.00		

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	- 100 = _____	/50 (round up to a whole number) x _____	= _____	<u>Fees Paid (\$)</u>

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)  
 Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	26,272
Name (Print/Type)	Telephone (212) 527-7717		
Name (Print/Type)	Date October 13, 2006		